



**NPDES #1300 Oily Discharge General
Permit
Discharge Monitoring Report**

PORSF
11.3.18.1 14

Submit report monthly by 15th
of following month to:
Oregon DEQ
2020 SW 4th Avenue, Suite 400
Portland, Oregon 97201

Site/File ID #: 32300

County: MULTNOMAH

Month/Year SEPT. 2004

Legal Name: KINDER MORGAN LIQUID TERMINALS LLC
Common Name: LINNTON TERMINAL
Facility Location: 11400 NW ST HELENS RD , PORTLAND

Monitoring for Oil/Water Separator TANK 3034

Day	Oil and Grease (mg/L)	Visible Sheen	Ethanol and/or MBTE	Flow
	Frequency varies, see permit	Daily, visual observation	Quarterly grab sample, if present on site and in bulk	Daily estimate, when discharging
Limit	10 mg/L monthly, 15 mg/L daily max.	No visible sheen at any time	No limit	No limit
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27				
28				
29				
30				
31				
Total				
Max.				
Average				

See Reverse Side for Additional Monitoring and Signature Block

USEPA SF



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Stormwater Monitoring

Only for facilities required to have NPDES permits for stormwater, per 40 CFR 122.26
Monitoring required for each point identified in the Stormwater Pollution Control Plan

Day	Visible Sheen	Floating Solids (associated with industry)	Total Copper (mg/L)	Total Lead (mg/L)	Total Zinc (mg/L)	pH (S.U.)	Total Suspended Solids (mg/L)
	Daily when discharging, visual observation	Once per month when discharging	Twice per year, grab sample	Twice per year, grab sample	Twice per year, grab sample	Twice per year, grab sample	Twice per year, grab sample
Limit	No visible sheen	No visible discharge*	0.1 mg/L*	0.4 mg/L*	0.6 mg/L*	Within 6.0 to 9.0	130 mg/L*
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30							
31							
Total							
Max.							
Average							

*These are benchmarks, not effluent limits. If benchmarks are exceeded, review/possible revision of Stormwater plan is required. See permit for more details.

Signature Requirement

I certify, under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

Signature of Responsible Official: _____

Name and Title (Please Print): _____

Date of Signature: _____

Telephone: _____

503 220 1276